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CONFIRMATION NO. 2521

<b>SERIAL NUMBER</b> 10/026,415	<b>FILING OR 371(c) DATE</b> 12/21/2001 <b>RULE</b>	<b>CLASS</b> 422	<b>GROUP ART UNIT</b> 1743	<b>ATTORNEY DOCKET NO.</b> 16926	
<b>APPLICANTS</b> Rosann Marie Kaylor, Cumming, GA; Chibueze O. Chidebelu-Eze, Atlanta, GA; Robert John Lyng, Alpharetta, GA; Stephen Quirk, Alpharetta, GA;					
<b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/07/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no, 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Lyng</i> Allowance <i>1/4/07</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GA	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22827					
<b>TITLE</b> <i>and</i> Diagnostic device, system and method					
<b>FILING FEE RECEIVED</b> 1062	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		